

# NAVIGATING NCQA'S Q-PASS

(QUALITY PERFORMANCE ASSESSMENT SUPPORT SYSTEM)

Corinne Torgesen

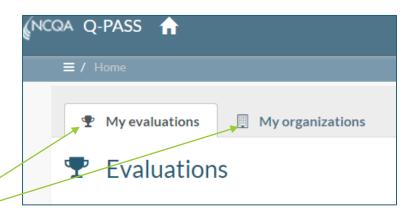
### **ENROLLMENT CHECKLIST**

- Organization's information
- Legal entity name
- Address, City, State, Zip
- Primary contact name and email address
- Secondary contact name and email address
- Practice location(s)
- List of specialties
- Practice's primary and secondary points of contact information
- Each practice site's tax ID number & NPI number
- Names of each clinician at each practice
- Each clinicians' information (full name, date of birth, specialty, board certification number, and NPI number)
- Representative from organization that has the legal authority to sign business agreements with NCQA
- Method of payment for fees (credit card or check)

### HOW TO ENROLL IN Q-PASS

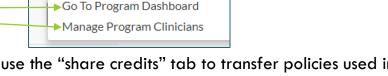
- 1. Go to <a href="https://apass.ncqa.org/spa/#!/sign-in/">https://apass.ncqa.org/spa/#!/sign-in/</a>
- 2. Create an account. (FYI: If you have an NCQA account already, your NCQA log in will work for Q-PASS as well).
- 3. Enroll your practice by following the 6 required steps.
- \* \*Note: You will search for your clinic. If your clinic is new to NCQA, NCQA will have to approve it before you can move forward with the enrollment process. (Can take up to 2 business days).
- 1) Add practice sites (You will need site tax ID # and NPI #). HRSA grantees will need to enter their H code. Make sure you have completed the necessary steps with HRSA.
  - If you have two clinics from one organization, make sure to connect them during the enrollment process. Select the primary site.
- 2) Add the recognition program for which you want to be recognized.
- 3) Set up clinicians (You will need clinicians', full name, birthdate, National Board Certification #, and NPI #).
- 4) Sign legal agreements.
- 5) Generate the invoice and pay. (Don't forget to enter the SHIP discount code: GIDDHI for 20% off at check out, or the Healthy Connections discount code: GIDDHB for 20% off after 1/31/19).
- 6) Review your information and complete enrollment. Remember to fill out the "Getting to Know Your Clinic" under Program Dashboard.
- 4. Once clinic is enrolled, your NCQA representative will contact you for a kick-off call, and your year for achieving recognition begins. NOTE: You'll want to make sure your clinic will be able to achieve recognition within the year before enrolling. If you haven't been assigned a NCQA Rep within 14 days of completing enrollment, follow-up (by asking a question on MyNCQA or QPASS, and/or call NCQA customer service 888-275-7585).

### NAVIGATING Q-PASS



There are two tabs on the top of the home page.

- 1) "My Organizations"
  - Used for enrolling the clinic in Q-PASS (i.e. adding users, adding clinicians, signing legal agreements, making payment, etc.).
  - There is a check list within this section that assists clinics in enrollment process and lets them know when the process is complete.
- 2) "My Evaluations"
  - Used for uploading documentation for each completed criteria.
  - To the right of the clinic name, click on the dark gray tab labeled "Actions."
  - 3 dashboard options are available
  - 1) "Organization Dashboard"



Actions

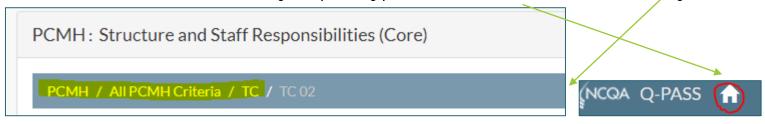
Actions -

Go To Organization Dashboard

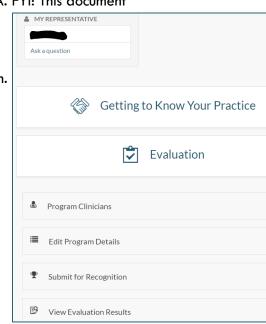
- Click here to transfer credits by uploading EMR pre-validation letter, to use the "share credits" tab to transfer policies used in multiple clinics from the same organization, and to manage people and roles.
- The "Get Help" section under this tab has additional resource tools and a helpful video about navigating through Q-PASS.
- This is the dashboard where the clinic's check-in results will be available. (See slide 11 for process instructions).

### NAVIGATING Q-PASS CONTINUED

- 2) "Program Dashboard"
  - This dashboard is where the clinic fills out the "Getting to Know Your Practice" document before the kick-off call with NCQA. FYI: This document asks for the number of Medicaid and Medicare patients your practice sees. It can be an estimate.
  - The name of your NCQA Rep and section to ask a question are also on this dashboard.
  - The "Get Help" section under this tab has additional resource tools and a helpful video about navigating through Q-PASS.
  - By clicking on the "Evaluation" tab on this dashboard, the clinic can go into the area where they upload their documentation.
  - Click on "PCMH: Patient-Centered Medical Home Recognition Criteria" and then select concept area to start with.
  - DO NOT use "back" button during the uploading process. Use the home icon and words on the light blue section.



- 3) "Manage Program Clinicians"
  - This dashboard is where the clinic can add or remove clinicians.



#### UPLOADING EVIDENCE TO Q-PASS

• Go to "My Evaluations" tab → click on dark gray box labeled "Actions" → "Program Dashboard" → "Evaluation" tab → PCMH: Patient-Centered Medical Home Recognition Criteria → select the concept area you will be uploading a document for → select criteria you will be uploading a document for → click on "evidence" or "documented process" to add your documentation → locate the document from your computer file, and add. Once all of the documentation for a check-in have been added, mark "check-in components for review" under the "Evaluation" tab.

#### Tips:

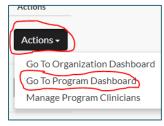
- You can use the "add link" button to connect one policy that fulfills the requirements for multiple criteria to link it to additional criteria, rather than uploading the document to Q-PASS library multiple times. (Library is under Organization Dashboard  $\rightarrow$  Upload Evidence).
- You can leave comments about a document to tell the evaluator which page(s) to focus on for a specific criteria, especially if the policy covers multiple criteria.
- A document can be unlinked if it is uploaded to the wrong criteria.
- For criteria that require documentation that contains PHI, click the "let's do a virtual review" button. This lets the evaluator know the process, screenshot, report, etc. will be shown to them during the check-in. DO NOT upload a document with potential PHI.
- If PHI is accidently uploaded, it can be flagged using the "Flag PHI" button.
- If a criteria does not apply to your practice (i.e. KM-02 H is N/A for practices with no pediatric population, and I is N/A for pediatric populations), there is a box on Q-PASS to select, "this is not applicable to us."

## UPLOADING EVIDENCE TO Q-PASS CONTINUED

NCQA Q-PASS 

| Wy evaluation | My organizations | Evaluations |

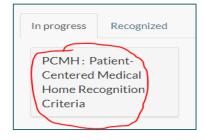
2.



3.



4.



5.



6.

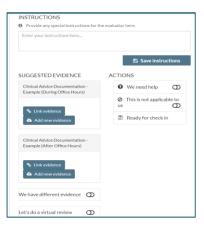
AC 05 : Clinical Advice Documentation (Core)

AC 05: Clinical Advice Documentation (Core)

Documents clinical advice in patient records and confirms clinafter-hours does not conflict with patient medical record.

Clinical Advice Documentation - Documentation - Documented Process

Clinical Advice Documentation - Evidence of Implementation



9.



#### CHECK-INS

- Once the clinic is enrolled in Q-PASS, they have a year to submit the required documentation and become PCMH recognized.
- Clinics are given 3 virtual check-ins with their Evaluator (different from NCQA Rep assigned at enrollment) during their year submission period. A 4<sup>th</sup> check-in can be purchased for half the price of the original enrollment fee if an additional check-in is needed. \*FYI: The kick-off call with NCQA Rep **DOES NOT** count as one of your 3 check-ins.\*
- As of February 2018, practices are required to check-in a minimum number of components for each check-in, and will not be able to check in more than a maximum number of components. \*(Note that each criterion has one or more components)\*
  - Check-in #1: Minimum 30, Maximum 70
  - Check-in #2: Minimum 5, Maximum 80
  - Check-in #3: Minimum 1, Maximum N/A
  - \*Note that the count does not include any auto-credit provided through pre-validated EMR vendors.\*
- Component = Documentation submitted for proof of implementation. If a Criteria requires a documented process and evidence of implementation, that counts as 2 components. For Criteria like KM-02 where there are reporting requirements, A-I, the Criteria has 10 components: 1 Documented process (include process for A-I in one policy), and 9 Evidence of Implementation.

#### CHECK-INS CONTINUED

- The "Check in Components for Review" button (under "Evaluation Tab") is to be clicked when the clinic is ready for a check-in call. Everything uploaded at that point is locked in and cannot be changed.
- NCQA has a "Suggested Pathway" document with their recommendations of which criteria to complete/submit for each check-in. It doesn't have to be followed completely, but try to stick to the number of criteria (cores in particular) that they recommend.
- Once "Check in Components for Review" has been selected, a calendar will come up on the screen, where the clinic chooses three possible dates/times for their check-in. Check-ins are scheduled at <u>least</u> 30 days out. This gives the Evaluator time to review the clinic's submitted documents.
- Check-ins are scheduled for 2 hours.
- The clinic will have the same Rep throughout the recognition process and the same Evaluator throughout their check-in process
- It is suggested that clinics schedule their first check-in within the first 3-4 months of enrolling in Q-PASS.

### CHECK-IN TIPS

- Check-in Core Criteria and policies during the first and second check-ins. This allows time to fix anything that the Evaluator marked as "not met" by the third check-in.
- Have all of the necessary reports/screenshots/other documents for virtual review opened or easily accessible for check-in.
- Know where to find any materials that were uploaded for non-virtual review criteria and have the NCQA standards close by in case the Evaluator has a question about any of your documentation and whether or not it fulfills a requirement.
- If you have two clinics from the same organization doing Q-PASS, upload the same documentation for each check-in so you can do the check-ins together. \*Be sure to connect clinics during enrollment process.\*

## VIEWING EVALUATION (CHECK-IN) RESULTS

#### To see notes from your Evaluator:

- 1. From Action Tab, go to "Organization Dashboard."
- Click on "Manage Evaluations."
- Click on "Actions."
- 4. Choose "Go To Program Dashboard."
- 5. Scroll down, and click on the tab, "View Evaluation Results."
- 6. Filter results to show "not met" and/or "met", and your evaluator's notes will appear.



### ADDITIONAL INFORMATION

- Once PCMH recognized by NCQA, clinics will have an annual review to keep their PCMH recognition status. NCQA reviews the required annual review documents 30 days prior to the clinic's anniversary date. Clinics should begin early to upload their required annual review documents.
- Do not use the "back" button when uploading documents, because information can be lost. Instead, use the "home" icon along with other navigation icons on the light blue section.
- The EMR Pre-Validation Letter is uploaded by going to "Organization Dashboard" → "Transfer Credits" → click to upload the pre-validation letter. The letter will be approved by NCQA, and then the criteria(s) it covers will be marked as complete or partially complete.
- Clinics can use the "Ask a Question" tab on the "Program Dashboard" to ask a question specific to their Q-PASS, documents, recognition, etc. (rather than go to <a href="www.my.ncqa.org">www.my.ncqa.org</a>). Questions first go to clinic's Rep and then are distributed as needed.

## QUESTIONS?

#### Corinne Torgesen



ctorgesen@eiph.idaho.gov

208-533-3191